Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

		CLAIMS AS	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS			6				[RATE	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		j	BASIC FEE	355.00	OR	BASIC FEE	710.00		
	TAL CHARGEAB	LE CLAIMS	/ minus 20=		. 1%			X\$ 9=		OR	X\$18=	1		
-	EPENDENT CLA		minus 3 =		* 4			X40=		OR	X80=			
	LTIPLE DEPEND										+270=	0=		
							+135=		OR		210			
* If the difference in column 1 is less than zero, enter "0" in colum								TOTAL		OR	TOTAL			
	CL		AMENDED - PART II (Column 2) (Column 3)				SMALL ENTITY			OTHER THAN R SMALL ENTITY				
_		(Column 1) CLAIMS			HEST	(00,0,1,1,1,0)	1		ADDI-			ADDI-		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	* (p	Minus		20	=		X\$ 9=		OR	X\$18=			
	Independent	· 2	Minus	***	3	=		X40=		OR	X80=			
_	FIRST PRESE	NTATION OF M	IULTIPLE DEP	ENDE	IT CLAIM		1	+135=		OR	+270=			
								TOTAL		ł	TOTAL	-		
								ADDIT. FEE	<u></u>	OR	ADDIT. FEE	<u></u> _		
		(Column 1)			umn 2)	(Column 3)			_				
18	10 22 . 4	CLAIMS	7 % . B		HEST MBER	PRESENT	1		ADDI-	Ì	1	ADDI-		
	3. 3. 5.	REMAINING AFTER			VIOUSLY	EXTRA	1	RATE	TIONAL		RATE	TIONAL		
Z		AMENDMENT		PA	D FOR		4		FEE	-{		FEE		
AMENDMENT	Total	*	Minus	**		=	4	X\$ 9=		OR	X\$18=	<u> </u>		
ME	Independent	*	Minus	***		=	4	X40=		OR	X80=			
	FIRST PRESE	NTATION OF N	MULTIPLE DEF	ENDE	NI CLAIN		L	+135=		OR	+270=	1		
								TOTAL	 	OR	TOTA			
ļ								ADDIT. FEE		_	ADDIT. FE	<u> </u>		
l		(Column 1)	<u> </u>		lumn 2)	(Column 3	3)			_				
ပြ		CLAIMS REMAINING AFTER	·	N	GHEST JMBER VIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL		
		AMENDMEN			ID FOR		_		FEE	4		FEE		
AMENDMENT	Total	*	Minus	**		=	_	X\$ 9=		OF	X\$18=			
	Independent	*	Minus	***	NEC 41	=	4	X40=		OF	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OF	+270=			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							TOTAL		-1	'			
	* If the "Highest Ni	imber Previously	Paid For" IN TH	IS SPAC	CE is less t	han 20, enter 2	20."	ADDIT. FEE		OF	ADDIT. FE	Ē		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

PATENT APPLICATION FEE DETERMINATION RECORD

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS								RATE FEE			RATE	FI	ΞE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	77.0	0.00	
то	TAL CHARGEA	BLE CLAIMS	17 minus 20=		*			X\$ 9=		OR	X\$18=	1		
IND	EPENDENT CL	AIMS	3 mir	nus 3 =	* Y			X43=		OR	X8 6 =			
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=		一	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	٦٢	0.	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER	OTHER THAN MALL ENTITY		
		CLAIMS		HIGH		(Columnia)	i 1		ADDI-	1	•		DDI-	
ENT		REMAINING AFTER AMENDMENT		NUM PREVI PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIC	NAL EE	
AMENDMENT	Total	* 17	Minus	** 2	D	= 6		X\$ 9=		OR	X\$18=			
ME	Independent	* 3	Minus	***	3	= 4		X4 3 =		OR	X86=			
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDEN.	T CLAIM			140			.000		\dashv	
								+140=		OR	+280=	-		
							•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
		(Column 1)	1		mn 2) HEST	(Column 3)	1.							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
\ME	Independent	*	Minus	***		=		X4 3 =		OR	X86=			
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN'	TCLAIM		J.	+140=		OR	+280=			
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)								ADDII. I EE I		•	ADDIT: TEE			
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- DNAL EE	
	Total	*	Minus	##		=	1	X\$ 9=	166	OR	X\$18=	<u> </u>	<u></u>	
	Independent	*	Minus	***		=]	X4 3 =			X8 6 =	 		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	/\-\		OR		├		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=				
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														